

RECEIVED

MAR 23 2007

DEPARTMENT OF ENVIRONMENTAL QUALITY  
STATE A Q PROGRAM

March 22, 2007

William Rogers  
Idaho Department of Environmental Quality  
1410 N. Hilton  
Boise, ID 83706

Re: Snake River Trailer Company  
315 Kit Avenue, Caldwell, Idaho  
Air Quality Permit to Construct Application &  
Pre-Permit Construction Request

Dear Mr. Rogers,

Enclosed please find an Air Quality Permit to Construct (PTC) Application for Snake River Trailer Company's new horse and cargo trailer manufacturing facility in Caldwell, Idaho. Snake River Trailer Company is seeking a Permit to Construct for two new paint booths and a curing room.

Snake River Trailer Company is also seeking Pre-Permit Construction Approval for the new facility. The facility is eligible under IDAPA 58.01.01.213.01 because it is a non-major source that does not use emission netting or offsets to maintain non-major status. The facility is not located in a Class I area. A public information meeting on the project has been scheduled for March 28, 2007 in accordance with IDAPA 58.01.01.213.02. A copy of the newspaper notification is attached.

Please do not hesitate to contact me with any questions you may have. I may be reached at (208) 453-8474 or by email at [cbtrlrs@spro.net](mailto:cbtrlrs@spro.net). Technical questions regarding the application materials can be made directly to our consultant, Sarah Stine (TORF Environmental Management) at (208) 571-2393, or via email at [slstine@torf.us](mailto:slstine@torf.us).

Very truly yours,  
Snake River Trailer Company



Rebecca Gordon  
Secretary - Treasurer

Enc.

# Snake River Facility 3/28/2007 Public Meeting Notification- Idaho Press Tribune, 3/16/2007

6 COMMUNITY

FRIDAY, MARCH 16, 2007 • Idaho Press-Tribune

COMMUNITY I

## LEGAL NOTICES

### NOTICE OF PUBLIC HEARING

NOTICE IS HEREBY GIVEN the Council of the City of Caldwell, Idaho will hold a public hearing April 3, 2007 at 7:00 p.m. in the Public Meeting Room of the Caldwell Police Station, 110 South 5th Avenue, Caldwell, Idaho. Council will accept oral and written public comment on proposed termination of use by the City of Caldwell of pressure irrigation standards adopted and published by Pioneer Irrigation District and the adoption of "Caldwell Municipal Irrigation District Supplemental Specifications". A copy of the proposed specifications is available upon request by calling Tammy Frans at (208) 455-3006. Written comments may be provided by facsimile to (208) 455-3012 or by mail at P.O. Box 1179, Caldwell, Idaho 83608 Attn.: Tammy Frans up to the date of the hearing.

Gordon N. Law,  
Caldwell City Engineer

Mar. 16, 2007 04536167

### NOTICE OF NOMINATION HANDLER MEMBERSHIP OF IDAHO APPLE COMMISSION

You are hereby notified that on the 27th day of March, 2007, at 7:00 p.m. at Noodles, 1802 Franklin Boulevard, Nampa, Idaho, a dinner meeting will be held of the apple handlers for the purpose of nominating two persons qualified to act as handler members of said commission. Such handler members will be nominated and will serve as handler member at large from District 1, 2, 3. The list of two nominees will be submitted to the governor who will appoint one of them to the commission.

Persons nominated for appointment to the commission as handler members must be citizens and residents of the state, over 25, actively engaged as handlers in apples, and must derive the major portion of their apple income from dealing in apples.

Persons voting as handlers cannot thereafter vote as a grower.

Dated this 14th day of February, 2007.

Candi Fitch  
Executive Director  
Idaho Apple Commission

March 2, 16, 2007 04535835

### NOTICE OF NOMINATION GROWER MEMBERSHIP OF IDAHO APPLE COMMISSION

You are hereby notified that on the 27th day of March, 2007, at 7:00 p.m. at Noodles, 1802 Franklin Boulevard, Nampa, Idaho, a dinner meeting will be held of the apple growers for the purpose of nominating two persons qualified to act as grower members of said commission. Such grower members will be nominated and will serve as grower member at large from District 1, 2, 3. The list of two nominees will be submitted to the governor who will appoint one of them to the commission.

### LEGAL NOTICE NOTICE OF INFORMATIONAL MEETING REGARDING PROPOSED NEW PAINTING FACILITY.

An informational meeting will be held regarding pre-permit construction approval (Air Quality Permit to Construct) for Snake River Trailer Company's proposed new horse and cargo trailer painting facility at 315 Kit Avenue, Caldwell, Idaho. The informational meeting will be held on March 28, 2007 at 6:00 pm in the Caldwell Public Library, Idaho Room. This Notice is published in accordance with IDAPA 58, Title 01, Chapter 01, Section 213.02.a.

Mar. 16, 2007 04536206

### CITY OF NAMPA, IDAHO NOTICE OF PUBLIC HEARING REGARDING PROPOSED VACATION OF PUBLIC RIGHT-OF-WAY

Notice is hereby given that on Monday, April 2nd, 2007 at the hour of 7:30 p.m., in the Council Chambers of the City Hall, 411 3rd Street So., Nampa, Canyon County, Idaho, a public hearing will be held before the Nampa City Council at the request of Nampa School District No. 131 and Lloyd Lumber Company.

The applicants are requesting vacation of the public right-of-way for:

1. Front Street from 14th Avenue South - easterly - to the mid point of 15th Avenue South.
2. Front Street from the mid point of 15th Avenue South - easterly 270.28 feet.
3. 15th Avenue South from the alley between 1st St South and Front Street to the property line of Union Pacific Railroad.

The streets are located within a DH (Historic District) zone. The applicants state they are requesting vacation of right-of-way:

1. To allow for additional parking for employees of Lloyd Lumber Company and Nampa School District No. 131.
2. To facilitate a truck loading area.
3. To prevent transient traffic from accessing the railroad tracks.

You are invited to attend said public hearing or submit written response to the office of the Planning Department, 411 3rd Street So., Nampa, Idaho 83655.

### SUMMONS

CASE NO. CV0501547  
CASE NO. CV0607896

1971  
23, 23

In the District Court of the Third Judicial District of the State of Idaho, in and for the County of Canyon  
Magistrate Division

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### In the Matter of the Termination of the Parent-Child Relationship

CHRISTOPHER FRAGA,  
SKYLAR FRAGA,  
ZACKARY FRAGA,

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KIMBERLY FORD,  
CHRISTOPHER FRAGA,

Parents.

### THE STATE OF IDAHO SENDS GREETINGS TO:

CHRISTOPHER FRAGA, 1006  
BANNER ST., NAMPA, IDAHO

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YOU ARE HEREBY NOTIFIED That a petition has been filed with regard to the above named children in the Magistrate Court of Canyon County, Idaho, by the Department of Health & Welfare, State of Idaho, Petitioners. A copy of said petition is attached hereto and on file in the above entitled Court.

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YOU ARE HEREBY DIRECTED To personally appear before the Honorable Thomas J. Ryan, at the Termination Hearing on the 10th day of April, 2007, at the hour of 11:00 a.m. at the Canyon County Courthouse located at 12th and Albany Streets, Caldwell, Canyon County, Idaho.

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YOU ARE FURTHER NOTIFIED that failure to appear at the hearing for termination will result in a default termination of your parental rights.

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YOU ARE FURTHER NOTIFIED That you have the right to counsel (a lawyer), and upon your request, and if you are financially unable to pay for one, the above entitled Court will appoint counsel to represent you in the said termination hearing.

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YOU ARE FURTHER NOTIFIED That you have the right to appeal to the District Court of the above entitled Court from any disposition or Order of the above entitled Court within forty-two (42) days of the date of filing said Order or Decree.

WITNESS My hand and the seal of said Court this 26 day of February, 2007.

WILLIAM H. HUBST, CLERK





**DEQ AIR QUALITY PROGRAM**  
 1410 N. Hilton, Boise, ID 83706  
 For assistance, call the  
**Air Permit Hotline – 1-877-5PERMIT**

# PERMIT TO CONSTRUCT APPLICATION

Revision 2  
 02/13/07

Please see instructions on page 2 before filling out the form.

COMPANY NAME, FACILITY NAME, AND FACILITY ID NUMBER			
1. Company Name	Snake River Trailer		
2. Facility Name	Kit Avenue	3. Facility ID No.	
4. Brief Project Description - One sentence or less	Install two new paint booths and one curing room		
PERMIT APPLICATION TYPE			
5. <input checked="" type="checkbox"/> New Facility <input type="checkbox"/> New Source at Existing Facility <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modify Existing Source: Permit No.: _____ Date Issued: _____ <input type="checkbox"/> Required by Enforcement Action: Case No.: _____			
6. <input checked="" type="checkbox"/> Minor PTC <input type="checkbox"/> Major PTC			
FORMS INCLUDED			
Included	N/A	Forms	DEQ Verify
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form GI – Facility Information	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form EU0 – Emissions Units General (4 forms)	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form EU1 - Industrial Engine Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form EU2 - Nonmetallic Mineral Processing Plants Please Specify number of forms attached: _____	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form EU3 - Spray Paint Booth Information Please Specify number of forms attached: <u>2</u>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form EU4 - Cooling Tower Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form EU5 – Boiler Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form HMAP – Hot Mix Asphalt Plant Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form CBP - Concrete Batch Plant Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form BCE - Baghouses Control Equipment	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Form SCE - Scrubbers Control Equipment	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Forms EI-CP1 - EI-CP4 - Emissions Inventory– criteria pollutants (Excel workbook, all 4 worksheets)	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	PP – Plot Plan	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Forms MI1 – MI4 – Modeling (Excel workbook, all 4 worksheets)	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form FRA – Federal Regulation Applicability	<input type="checkbox"/>

DEQ USE ONLY	
Date Received	
<p>RECEIVED</p> <p>MAR 23 2007</p> <p>DEPARTMENT OF ENVIRONMENTAL QUALITY STATE A.Q. PROGRAM</p>	
Project Number	
Payment / Fees Included?	
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Check Number	



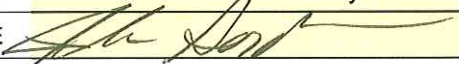
**IDEQ AIR QUALITY PROGRAM**  
 1410 N. Hilton, Boise, ID 83706  
 For assistance, call the  
**Air Permit Hotline – 1-877-5PERMIT**

## PERMIT TO CONSTRUCT APPLICATION

Revision 2  
 02/13/07

Please see instructions on page 2 before filling out the form.

**All information is required. If information is missing, the application will not be processed.**

IDENTIFICATION	
1. Company Name	Snake River Trailer
2. Facility Name (if different than #1)	Kit Avenue
3. Facility I.D. No.	
4. Brief Project Description:	Install two new paint booths and one curing room
FACILITY INFORMATION	
5. Owned/operated by: (✓ if applicable)	<input type="checkbox"/> Federal government <input type="checkbox"/> County government <input type="checkbox"/> State government <input type="checkbox"/> City government
6. Primary Facility Permit Contact Person/Title	Jason Fox/Plant Manager
7. Telephone Number and Email Address	208.453.8474/ srtc@hughes.net
8. Alternate Facility Contact Person/Title	James Gordon/Assistant Plant Manager
9. Telephone Number and Email Address	208.453.8474 / warranty@cbtrailers.com
10. Address to which permit should be sent	P.O. Box 879
11. City/State/Zip	Caldwell/ID/83606
12. Equipment Location Address (if different than #9)	315 Kit Avenue
13. City/State/Zip	Caldwell/ID/83605
14. Is the Equipment Portable?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
15. SIC Code(s) and NAISC Code	Primary SIC: 3715    Secondary SIC (if any):    NAICS: 336212
16. Brief Business Description and Principal Product	Fabrication of metal horse/stock/utility/cargo/flatbed trailers
17. Identify any adjacent or contiguous facility that this company owns and/or operates	1508 East Chicago Street/Caldwell, ID/83605 (Facility # P-990028)
PERMIT APPLICATION TYPE	
18. Specify Reason for Application	<input checked="" type="checkbox"/> New Facility <input type="checkbox"/> New Source at Existing Facility <input type="checkbox"/> Modify Existing Source: Permit No.: _____ Date Issued: _____ <input type="checkbox"/> Unpermitted Existing Source: <input type="checkbox"/> Required by Enforcement Action: Case No.: _____
CERTIFICATION	
IN ACCORDANCE WITH IDAPA 58.01.01.123 (RULES FOR THE CONTROL OF AIR POLLUTION IN IDAHO), I CERTIFY BASED ON INFORMATION AND BELIEF FORMED AFTER REASONABLE INQUIRY, THE STATEMENTS AND INFORMATION IN THE DOCUMENT ARE TRUE, ACCURATE, AND COMPLETE.	
19. Responsible Official's Name/Title	Rebecca Gordon /Secretary-Treasurer
20. RESPONSIBLE OFFICIAL SIGNATURE	 <div style="float: right;">Date: 3-22-07</div>
21. <input checked="" type="checkbox"/> Check here to indicate you would like to review a draft permit prior to final issuance.	





DEQ AIR QUALITY PROGRAM  
1410 N. Hilton  
Boise, ID 83706  
For assistance: (208) 373-0502

# PERMIT TO CONSTRUCT APPLICATION

Please see instructions on page 2 before filling out the form.

IDENTIFICATION						
Company Name:		Facility Name:			Facility ID No:	
Snake River Trailer		Kit Avenue				
Brief Project Description:		Install two new paint booths and one curing room				
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION						
1. Emissions Unit (EU) Name:		BOOTH 1 AIR HEATER				
2. EU ID Number:		AIRHTRI				
3. EU Type:		<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:    Date Issued:				
4. Manufacturer:		BANANZA				
5. Model:		CUSTOM UNIT				
6. Maximum Capacity:		2.295 MMBTU/HR OUTPUT				
7. Date of Construction:		AWAITING PRE-PERMIT CONSTRUCTION APPROVAL (2Q 2007)				
8. Date of Modification (if any)		--				
9. Is this a Controlled Emission Unit?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes    If Yes, Complete the following section. If No, go to line 18.				
EMISSIONS CONTROL EQUIPMENT						
10. Control Equipment Name and ID:						
11. Date of Installation:		12. Date of Modification (if any):				
13. Manufacturer and Model Number:						
14. ID(s) of Emission Unit Controlled:						
15. Is operating schedule different than emission units(s) involved?:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
16. Does the manufacturer guarantee the control efficiency of the control equipment?		<input type="checkbox"/> Yes <input type="checkbox"/> No    (If yes, attach and label manufacturer guarantee)				
Control Efficiency		Pollutant Controlled				
		PM	PM10	SO <sub>2</sub>	NOx	VOC
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency.						
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)						
18. Actual Operation		8 HRS/DAY, 5 DAYS/WEEK, 6 MONTHS/YEAR				
19. Maximum Operation		24 HRS/DAY, 7 DAYS/WEEK, 12 MONTHS/YEAR				
REQUESTED LIMITS						
20. Are you requesting any permit limits?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    (If Yes, check all that apply below)				
<input type="checkbox"/> Operation Hour Limit(s):						
<input type="checkbox"/> Production Limit(s):						
<input type="checkbox"/> Material Usage Limit(s):						
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports				
<input type="checkbox"/> Other:						
21. Rationale for Requesting the Limit(s):						



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1410 N. Hilton  
Boise, ID 83706  
For assistance: (208) 373-0502

# PERMIT TO CONSTRUCT APPLICATION

Please see instructions on page 2 before filling out the form.

IDENTIFICATION						
Company Name:		Facility Name:			Facility ID No:	
Snake River Trailer		Kit Avenue				
Brief Project Description:		Install two new paint booths and one curing room				
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION						
1. Emissions Unit (EU) Name:		BOOTH 2 AIR HEATER				
2. EU ID Number:		AIRHTR2				
3. EU Type:		<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:    Date Issued:				
4. Manufacturer:		BANANZA				
5. Model:		CUSTOM UNIT				
6. Maximum Capacity:		2.295 MMBTU/HR OUTPUT				
7. Date of Construction:		AWAITING PRE-PERMIT CONTRUCTION APPROVAL (2Q 2007)				
8. Date of Modification (if any)		--				
9. Is this a Controlled Emission Unit?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes    If Yes, Complete the following section. If No, go to line 18.				
EMISSIONS CONTROL EQUIPMENT						
10. Control Equipment Name and ID:						
11. Date of Installation:		12. Date of Modification (if any):				
13. Manufacturer and Model Number:						
14. ID(s) of Emission Unit Controlled:						
15. Is operating schedule different than emission units(s) involved?:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
16. Does the manufacturer guarantee the control efficiency of the control equipment?:		<input type="checkbox"/> Yes <input type="checkbox"/> No    (If yes, attach and label manufacturer guarantee)				
Control Efficiency		Pollutant Controlled				
		PM	PM10	SO <sub>2</sub>	NO <sub>x</sub>	VOC
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency.						
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)						
18. Actual Operation		8 HRS/DAY, 5 DAYS/WEEK, 6 MONTHS/YEAR				
19. Maximum Operation		24 HRS/DAY, 7 DAYS/WEEK, 12 MONTHS/YEAR				
REQUESTED LIMITS						
20. Are you requesting any permit limits?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    (If Yes, check all that apply below)				
<input type="checkbox"/> Operation Hour Limit(s):						
<input type="checkbox"/> Production Limit(s):						
<input type="checkbox"/> Material Usage Limit(s):						
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports				
<input type="checkbox"/> Other:						
21. Rationale for Requesting the Limit(s):						





DEQ AIR QUALITY PROGRAM  
1410 N. Hilton  
Boise, ID 83706  
For assistance: (208) 373-0502

# PERMIT TO CONSTRUCT APPLICATION

Please see instructions on page 2 before filling out the form.

IDENTIFICATION						
Company Name:		Facility Name:		Facility ID No:		
Snake River Trailer		Kit Avenue				
Brief Project Description:		Install two new paint booths and one curing room				
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION						
1. Emissions Unit (EU) Name:	DRYING ROOM AIR HEATER					
2. EU ID Number:	AIRHTR3					
3. EU Type:	<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:    Date Issued:					
4. Manufacturer:	REZNOR					
5. Model:	HX225E-8					
6. Maximum Capacity:	180 MBTU/HR OUTPUT					
7. Date of Construction:	AWAITING PRE-PERMIT CONSTRUCTION APPROVAL (2Q 2007)					
8. Date of Modification (if any)	--					
9. Is this a Controlled Emission Unit?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes    If Yes, Complete the following section. If No, go to line 18.					
EMISSIONS CONTROL EQUIPMENT						
10. Control Equipment Name and ID:						
11. Date of Installation:			12. Date of Modification (if any):			
13. Manufacturer and Model Number:						
14. ID(s) of Emission Unit Controlled:						
15. Is operating schedule different than emission units(s) involved?:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
16. Does the manufacturer guarantee the control efficiency of the control equipment?:	<input type="checkbox"/> Yes <input type="checkbox"/> No    (If yes, attach and label manufacturer guarantee)					
Control Efficiency	Pollutant Controlled					
	PM	PM10	SO <sub>2</sub>	NO <sub>x</sub>	VOC	CO
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency.						
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)						
18. Actual Operation	8 HRS/DAY, 5 DAYS/WEEK					
19. Maximum Operation	24 HRS/DAY, 7 DAYS/WEEK					
REQUESTED LIMITS						
20. Are you requesting any permit limits?:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    (If Yes, check all that apply below)					
<input type="checkbox"/> Operation Hour Limit(s):						
<input type="checkbox"/> Production Limit(s):						
<input type="checkbox"/> Material Usage Limit(s):						
<input type="checkbox"/> Limits Based on Stack Testing	Please attach all relevant stack testing summary reports					
<input type="checkbox"/> Other:						
21. Rationale for Requesting the Limit(s):						



DEQ AIR QUALITY PROGRAM  
1410 N. Hilton  
Boise, ID 83706  
For assistance: (208) 373-0502

# PERMIT TO CONSTRUCT APPLICATION

Please see instructions on page 2 before filling out the form.

IDENTIFICATION						
Company Name:		Facility Name:		Facility ID No:		
Snake River Trailer		Kit Avenue				
Brief Project Description:		Install two new paint booths and one curing room				
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION						
1. Emissions Unit (EU) Name:	DRY ROOM					
2. EU ID Number:	DRYRM					
3. EU Type:	<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:    Date Issued:					
4. Manufacturer:	SPRAY SYSTEMS					
5. Model:	CUSTOM UNIT					
6. Maximum Capacity:	1400 CFM EXHAUST FLOW					
7. Date of Construction:	AWAITING PRE-PERMIT CONSTRUCTION APPROVAL (2Q 2007)					
8. Date of Modification (if any)	--					
9. Is this a Controlled Emission Unit?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes    If Yes, Complete the following section. If No, go to line 18.					
EMISSIONS CONTROL EQUIPMENT						
10. Control Equipment Name and ID:						
11. Date of Installation:		12. Date of Modification (if any):				
13. Manufacturer and Model Number:						
14. ID(s) of Emission Unit Controlled:						
15. Is operating schedule different than emission units(s) involved?:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
16. Does the manufacturer guarantee the control efficiency of the control equipment?		<input type="checkbox"/> Yes <input type="checkbox"/> No    (If yes, attach and label manufacturer guarantee)				
		Pollutant Controlled				
		PM	PM10	SO <sub>2</sub>	NOx	VOC
Control Efficiency						CO
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency.						
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)						
18. Actual Operation		8 HRS/DAY, 5 DAYS/WEEK				
19. Maximum Operation		24 HRS/DAY, 7 DAYS/WEEK				
REQUESTED LIMITS						
20. Are you requesting any permit limits?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    (If Yes, check all that apply below)				
<input type="checkbox"/> Operation Hour Limit(s):						
<input type="checkbox"/> Production Limit(s):						
<input checked="" type="checkbox"/> Material Usage Limit(s):		See Form EU3 Documentation				
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports				
<input type="checkbox"/> Other:						
21. Rationale for Requesting the Limit(s):		SEE FORM EU3 DOCUMENTATION				





DEQ AIR QUALITY PROGRAM  
1410 N. Hilton  
Boise, ID 83706  
For assistance: (208) 373-0502

Emissions Units - Spray Paint Booth Information **Form EU3**  
**PERMIT TO CONSTRUCT APPLICATION**

Please see instructions on page 2 before filling out the form.

IDENTIFICATION					
Company Name:		Facility Name:		Facility ID No:	
Snake River Trailer		Kit Avenue			
Brief Project Description: Install two new paint booths and one drying room					
BOOTH INFORMATION					
1. Booth Type: <input checked="" type="checkbox"/> New Booth <input type="checkbox"/> Unpermitted Existing Booth					
<input type="checkbox"/> Modification to a Permitted Booth, permit #: , date issued:					
2. Construction Date: AWAITING PRE-PERMIT CONTRUCTION APPROVAL (2Q 2007)					
SPRAY GUN DESCRIPTION AND SPECIFICATIONS					
Gun No.	3. Manufacturer	4. Model	5. Type	6. Transfer Eff. %	7. Rated Capacity (gal/hr)
1	Sames	MIV6600	Electrostatic HVLP	50-65%	5.625
2					
3					
4					
Number of guns to be used simultaneously: 1 gun per booth, 2 booths simultaneously					
SPRAY MATERIAL DESCRIPTION AND SPECIFICATIONS					
8. Type of Spray Material Used	9. Type of Material Coated	10. Max. Usage (gal/day)	11. Solid Content (lb/gal)	12. VOC Content (lb/gal)	13. MSDS Attached? (Y/N)
See Tables in Form EI Documentation	Metal	See Tables in Form EI Documentation	See Tables in Form EI Documentation	See Tables in Form EI Documentation	Y
REQUEST FOR PERMIT LIMITATIONS					
14. Are you requesting any permit limits? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. If yes, check all that apply below and fill in requested limit(s)					
<input type="checkbox"/> Operation Hour Limits:			<input type="checkbox"/> Production Limits:		
<input checked="" type="checkbox"/> Material Usage Limits: See Form EU3 Documentation			<input checked="" type="checkbox"/> Other: Total Facility Xylene = 9.9 tons/yr		
15. Rationale for Requesting the Limit(s): See Form EU3 Documentation					
EMISSION CONTROL DEVICE (FILTER <sup>b</sup> ) DESCRIPTION AND SPECIFICATIONS					
Stack Served	16. Filter Manufacturer	17. Model	18. PM Control Efficiency(%) <sup>a</sup>	19. Dimension (Total Area, Thickness and Number of Filters)	
Stack 1	American Air Filter	AG-28	98.13	52 sq ft, 2" Thick, 15 20"x25" filters	
Stack 2	American Air Filter	AG-28	98.13	52 sq ft, 2" Thick, 15 20"x25" filters	
Stack 3					
Stack 4					
Notes: a. Provide either stack test data or vendor's documentation to support the control efficiency specified above. b. Fill out and submit appropriate control equipment form(s) if this booth has a control device(s) other than a filter system.					
BOOTH OPERATING SCHEDULE (hours/day, or hours/year, or other)					
20. Actual Operation: 8 hrs/day, 260 days/yr			21. Maximum Operation: 16 hrs/day, 310 days/yr		



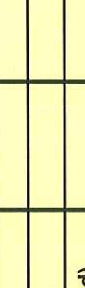
DEQ AIR QUALITY PROGRAM  
1410 N. Hilton  
Boise, ID 83706  
For assistance: (208) 373-0502

Emissions Units - Spray Paint Booth Information **Form EU3**  
**PERMIT TO CONSTRUCT APPLICATION**

Please see instructions on page 2 before filling out the form.

IDENTIFICATION						
Company Name: Snake River Trailer			Facility Name: Kit Avenue		Facility ID No:	
Brief Project Description: Install two new paint booths and one drying room						
BOOTH INFORMATION						
1. Booth Type: <input checked="" type="checkbox"/> New Booth <input type="checkbox"/> Unpermitted Existing Booth <input type="checkbox"/> Modification to a Permitted Booth, permit #: , date issued:						
2. Construction Date: AWAITING PRE-PERMIT CONTRUCTION APPROVAL (2Q 2007)						
SPRAY GUN DESCRIPTION AND SPECIFICATIONS						
Gun No.	3. Manufacturer	4. Model	5. Type	6. Transfer Eff. %	7. Rated Capacity (gal/hr)	
1	Sames	MIV6600	Electrostatic HVLP	50-65%	5.625	
2						
3						
4						
Number of guns to be used simultaneously: 1 gun per booth, 2 booths simultaneously						
SPRAY MATERIAL DESCRIPTION AND SPECIFICATIONS						
8. Type of Spray Material Used	9. Type of Material Coated	10. Max. Usage (gal/day)	11. Solid Content (lb/gal)	12. VOC Content (lb/gal)	13. MSDS Attached? (Y/N)	
See Tables in Form EI Documentation	Metal	See Tables in Form EI Documentation	See Tables in Form EI Documentation	See Tables in Form EI Documentation	Y	
REQUEST FOR PERMIT LIMITATIONS						
14. Are you requesting any permit limits? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. If yes, check all that apply below and fill in requested limit(s)						
<input type="checkbox"/> Operation Hour Limits:			<input type="checkbox"/> Production Limits:			
<input checked="" type="checkbox"/> Material Usage Limits: See Form EU3 Documentation			<input checked="" type="checkbox"/> Other: Total Facility Xylene = 9.9 tons/yr			
15. Rationale for Requesting the Limit(s): See Form EU3 Documentation						
EMISSION CONTROL DEVICE (FILTER <sup>b</sup> ) DESCRIPTION AND SPECIFICATIONS						
Stack Served	16. Filter Manufacturer	17. Model	18. PM Control Efficiency(%) <sup>a</sup>	19. Dimension (Total Area, Thickness and Number of Filters)		
Stack 1						
Stack 2						
Stack 3	American Air Filter	AG-28	98.13	52 sq ft, 2" Thick, 15 20"x25" filters		
Stack 4	American Air Filter	AG-28	98.13	52 sq ft, 2" Thick, 15 20"x25" filters		
Notes: a. Provide either stack test data or vendor's documentation to support the control efficiency specified above. b. Fill out and submit appropriate control equipment form(s) if this booth has a control device(s) other than a filter system.						
BOOTH OPERATING SCHEDULE (hours/day, or hours/year, or other)						
20. Actual Operation: 8 hrs/day, 260 days/yr			21. Maximum Operation: 16 hrs/day, 310 days/yr			



						DEQ AIR QUALITY PROGRAM 1410 N. Hilton, Boise, ID 83706 For assistance, call the Air Permit Hotline - 1-877-5PERMIT						PERMIT TO CONSTRUCT APPLICATION Revision 2 2/14/2007					
Company Name:						Snake River Trailer											
Facility Name:												Kit Avenue					
Facility ID No.:																	
Brief Project Description:						Install two new paint booths and one curing room											
Please see instructions on next page before filling out the form.																	
SUMMARY OF FACILITY WIDE EMISSION RATES FOR CRITERIA POLLUTANTS - POINT SOURCES																	
3.																	
1. Emissions units			2. Stack ID			PM <sub>10</sub>		SO <sub>2</sub>		NO <sub>x</sub>		CO		VOC		Lead	
			lb/hr	T/yr		lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr	lb/hr	T/yr
Booth 1 Air Heater			0.02	0.09		0.00	0.01	0.26	1.16	0.11	0.49	0.02	0.07	0.00	0.00		
Booth 2 Air Heater			0.02	0.09		0.00	0.01	0.26	1.16	0.11	0.49	0.02	0.07	0.00	0.00		
Dry Room Air Heater			0.00	0.01		0.00	0.00	0.02	0.09	0.01	0.04	0.00	0.01	0.00	0.00		
Paint Booths 1 and 2			0.92	0.68								194.93	58.71				
Dry Room Exhaust												19.49	5.87				
(insert more rows as needed)																	
Total			0.96	0.88		0.00	0.02	0.55	2.41	0.23	1.02	214.45	64.72	0.00	0.00		

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[illegible]







**Legend**

↑ N

Scale - feet  
0 50

Tier Edge  
Building Edge  
Fence

**TORF**  
ENVIRONMENTAL  
MANAGEMENT

**Plot Plan**  
Snake River Trailer Company  
315 Kit Ave  
Caldwell, Idaho

February 2007

DEQ AIR QUALITY PROGRAM 1410 N. Hilton, Boise, ID 83706 For assistance, call the Air Permit Hotline - 1-877-5PERMIT		PERMIT TO CONSTRUCT APPLICATION Revision 2 2/14/2007							
Company Name:		Snake River Trailer							
Facility Name:		Kit Avenue							
Facility ID No.:									
Brief Project Description:		Install two new paint booths and one curing room							
Please see instructions on next page before filling out the form.									
SUMMARY OF AIR IMPACT ANALYSIS RESULTS - CRITERIA POLLUTANTS									
		1.	2.	3.	4.	5.			
Criteria Pollutants	Averaging Period	Significant Impact Analysis Results (µg/m3)	Significant Contribution Level (µg/m3)	Full Impact Analysis Results (µg/m3)	Background Concentration (µg/m3)	Total Ambient Impact (µg/m3)	NAAQS (µg/m3)	Percent of NAAQS	
	PM <sub>10</sub>	24-hour		5	36.34	81.00	117.34	150	78%
		Annual		1	1.52	27.00	28.52	50	57%
		3-hr		25	Below threshold			1300	
		24-hr		5	Below threshold			365	
SO <sub>2</sub>	Annual		1	Below threshold			80		
	Annual		1	4.16	32.00	36.16	100	36%	
NO <sub>2</sub>	1-hr		2000	Below threshold			10000		
	8-hr		500	Below threshold			40000		



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DEQ AIR QUALITY PROGRAM  
1410 N. Hilton  
Boise, ID 83706  
For assistance: (208) 373-0502

# PERMIT TO CONSTRUCT APPLICATION

IDENTIFICATION		
Company Name: Snake River Trailer	Facility Name: Kit Avenue	Facility ID No:
Brief Project Description: Install two new paint booths and one curing room		
APPLICABILITY DETERMINATION		
1. Will this project be subject to 1990 CAA Section 112(g)? (Case-by-Case MACT)	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES* <input type="checkbox"/> DON'T KNOW * If YES then applicant must submit an application for a case-by-case MACT determination [IAC 567 22-1(3)"b" (8)]	
2. Will this project be subject to a New Source Performance Standard? (40 CFR part 60)	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES* <input type="checkbox"/> DON'T KNOW *If YES please identify sub-part: _____	
3. Will this project be subject to a MACT ( <u>M</u> aximum <u>A</u> chievable <u>C</u> ontrol <u>T</u> echnology) regulation? (40 CFR part 63)  THIS ONLY APPLIES IF THE PROJECT EMITS A HAZARDOUS AIR POLLUTANT – SEE TABLE A FOR LIST	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES* <input type="checkbox"/> DON'T KNOW *If YES please identify sub-part: _____	
4. Will this project be subject to a NESHAP ( <u>N</u> ational <u>E</u> mission <u>S</u> tandards for <u>H</u> azardous <u>A</u> ir <u>P</u> ollutants) regulation? (40 CFR part 61)	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES* <input type="checkbox"/> DON'T KNOW *If YES please identify sub-part: _____	
5. Will this project be subject to PSD ( <u>P</u> revention of <u>S</u> ignificant <u>D</u> eterioration)? (40 CFR section 52.21)	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> DON'T KNOW	
6. Was netting done for this project to avoid PSD?	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES* <input type="checkbox"/> DON'T KNOW *If YES please attach netting calculations	
IF YOU ARE UNSURE HOW TO ANSWER ANY OF THESE QUESTIONS CALL 1-208-373-0502		